HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND MONTHLY COBRA PREMIUMS ACTIVE EMPLOYEES ALL BU'S EXCEPT BU12 EFFECTIVE JANUARY 1, 2010

		Total
	Type of	COBRA
Benefit Plan	Enrollment	Premium
MEDICAL PLANS		
EUTF PPO (HMA) - 90/10 Plan	Self	\$287.56
	Two-Party	\$698.52
	Family	\$891.46
EUTF PPO (HMSA) - 80/20 Plan	Self	\$278.17
	Two-Party	\$675.71
	Family	\$862.37
EUTF Prescription Drug (informedRx)	Self	\$65.14
	Two-Party	\$158.16
	Family	\$201.92
EUTF HMO (HMSA) Prescription Drug	Self	\$390.54
	Two-Party	\$948.56
	Family	\$1,210.58
Kaiser Comprehensive Prescription Drug	Self	\$316.71
	Two-Party	\$768.63
	Family	\$981.63
Kaiser Basic Prescription Drug	Self	\$280.32
	Two-Party	\$680.26
	Family	\$868.90
EUTF Supplemental (HMSA)	Self	\$140.46
	Two-Party	\$341.56
	Family	\$436.09
Royal State Supplemental Prescription Drug	Self	\$56.28
	Two-Party	\$139.60
	Family	\$157.43
EUTF High Deductible Health Plan	Self	\$265.53
(HMSA)	Two-Party	\$645.21
Prescription Drug	Family	\$823.57
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DENTAL PLAN	Calt	CO1 10
HDS Dental	Self	\$31.40
	Two-Party Family	\$62.81 \$103.37
	ганну	\$103.37
VISION PLAN		
VSP Vision	Self	\$6.16
	Two-Party	\$11.40
	Family	\$14.91
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CHIROPRACTIC		
RSN Chiropractic	Self	\$1.47
	Two-Party	\$2.94
	Family	\$3.12
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